

INITIAL LEAK REPORT

LEAK NUMBER: 188-20370-1 RC NUMBER: 10-2-1 TODAY'S DATE: 10/27/88 TIME: 4:00 PM
ADDRESS: T.C. 5 - Sunrise Hill DATE FOUND: 10/27/88 GRADE: (1)
READING: _____ LOC: _____ OPERATOR: D REPORTED BY: F
MI: (3227) PLAT: 182 BLOCK: (7) SURFACE OVER LEAK: _____ CITY: ... DISTRICT NO: (13)
FED'L LAND? (N) (Y/N) CATH. PROT.? (Y) (Y/N) YEAR INST: (44) SYSTEM PRESS: 325 CPAD: (020-12-1)

REPAIR REPORT

LOCATION: ...
WORK DONE/REPAIRS: ...
11-4-88 G.L. replaced 30" PIPE
REPAIRED BY: ... DATE: 10-28-88
JOB CODE: (M) (C-Capital, M-Maintenance)
LINE SIZE: (30) inches
LINE MATERIAL: (2) (1-Cast Iron or Ductile Iron, 2-Copper, 3-Steel or Wrought Iron, 4-Aldyl A, 5-TE 416, 6-Plastic other than 'A' or 'T', 7-Other)
LINE USE: (1) (1-Distribution Main, 2-Service, 3-Transmission Main, 4-Gathering Main, 5-Distribution Header Main)

FOR SERVICE ONLY - Aboveground? (1) Yes (1) No
Material of Main Connected to Service: (1) (1-Cast Iron, 2-Steel or 3-Plastic)
LEAK CAUSE: (M) (1-Corrosion, 2-Damage by Outside Forces, 3-Origin, 4-Damage by Electrical Failure, 5-Construction Defects, 6-Material Failure, 7-Cast Iron Fractures, 8-Other)
LEAK SOURCE: (LW) (1-Birth Weld, 2-Longitudinal Weld, 3-Other Welds, 4-Body of Pipe, 5-Valves, 6-Scraper Trap, 7-Tap Connection, 8-Drip, 9-Compressor Components, 10-Gas Cooler, 11-Physical (Mechanical) Joint, 12-Fitting, 13-Bell Joint, 14-Regulator, 15-Meter, 16-Other)
TYPE REPAIR: (P) (1-Temporary, 2-Permanent)
REPAIR CODE: (P) (1-Weld Over Sleeve or Cap, 2-Patch Welded, 3-Clamp, 4-Replace Pipe, 5-Tighten Cap or Bolt, 6-Bell Joint Clamp, 7-Bell Joint Seal, 8-Other)

FOR CAST IRON ONLY - NO. OF D.J. CLAMPS/SEALS/FRACTURES: 1

MATERIAL FAILURE REPORT? (Y) Yes (1) No

REP BY: Foot Survey, Call-in, Damaging Contractor or Outside Force, Public Service, Serviceman or Company Emp., Mobile Survey, Other
SURFACE OVER LEAK: Concrete, Tar Compound, Unsurfaced, Other

INSPECTION REPORT

FOR: (1) MAIN or (1) SERVICE
DATE: ... REPORTED BY: ...
SIZE: 30 in WALL THICK.: ... in MATERIAL: ...
COVER ON PIPE: 24 FT OF PIPE EXPOSED: 10 SPEC.: ...
TEST-DATE: 10-28-88 TIME: ... PRESSURE: N/A psig
COATINGS: (1) NONE (BARE) (1) DOUBLE WRAP (1) SINGLE WRAP (1) OTHER: ...
WRAP CONDITION: (1) Excellent (1) Fair (1) Poor
PIPE CONDITION:
EXTERNAL - RUST: (1) None (1) Light (1) Heavy
PITTING: (1) None (1) Light (1) Heavy
PIT DEPTH (MAX): ...
GRAPHITIZED (C.I.): (1) Yes (1) No
INTERNAL - INSPECTION: (1) Clean (1) Dirty (1) Dirty
RUST: (1) None (1) Light (1) Heavy
PITTING: (1) None (1) Light (1) Heavy
PIT DEPTH (MAX): ...
SOIL TYPE: (1) Hard Rock (1) Soft Rock (1) Sandy Clay (1) Hard Clay (1) Sand (1) Other: ...

CAST IRON MAIN FRACTURE REPORT: (Cause or probable cause)

PINPOINT AND REVIEW INFORMATION

PINPOINT - BY: ... DATE: ...
LOCATION: ...
REVIEWED BY: DV McCoke DATE: 11-4-88

Post Repair Recheck Req'd (1) Yes (1) No
Date: ... Reading: ... By: ...

PC 11/2/88

gm 4701893

GRADE 1 LEAK RESPONSE (For Downgraded or Deleted Grade 1 Leaks)

LEAK NUMBER: _____ CREW LEADER: DAWSON

ACTION TAKEN: Proven & Ventured DATE: 11/27/88 TIME: 4:00 PM BY: JB

REFERENCE: ☒ Downgrade Leak to Grade 2 ☐ Delete Leak

READING TAKEN DURING RESPONSE: (Other than initial reading)

READING	INST.	LOCATION/REMARKS	TIME
1st <u>2.20</u>	<u>C</u>	<u>OVER MAIN</u>	<u>4:00 PM</u>
2nd _____	_____	_____	_____ M
3rd _____	_____	_____	_____ M

FOR CONSTRUCTION SUPERVISOR'S USE:

Repair By: / / Perform Special Recheck on: / / Authorized By: _____ Date: / /

SPECIAL PRE-REPAIR RECHECKS:

READING	INST.	GRADE	LOCATION/REMARKS	TIME	DATE	OPERATOR	ACTION/ FOLLOW-UP
_____	_____	_____	_____	_____ M	<u>/ /</u>	_____	_____
_____	_____	_____	_____	_____ M	<u>/ /</u>	_____	_____
_____	_____	_____	_____	_____ M	<u>/ /</u>	_____	_____
_____	_____	_____	_____	_____ M	<u>/ /</u>	_____	_____

* Instrument Type: H - Hydrogen flame ionization OR C - combustible gas indicator

LOCATION SKETCH

